

DISPOSITION OF COMPLAINT OF DISCRIMINATION

For use of this form, see AR 690-600; the proponent agency is OSA

**Requirements Control
Symbol - 0288-EEO-SA**

1. NAME OF COMPLAINANT (<i>Last, First, Middle Initial</i>)		5. ACTIVITY		6. EEOCRA DOCKET NO.	
2. COMPLAINANT'S SSN					
3. COMPLAINANT'S JOB TITLE	4. GRADE			7. DATE COMPLAINT FILED	

PART A- BASIS FOR COMPLAINT (Check Appropriate Box)

8. RACE	9. COLOR	10. RELIGION	11. HANDICAP <input type="checkbox"/> Mental <input type="checkbox"/> Physical	12. SEX <input type="checkbox"/> Female <input type="checkbox"/> Male	13. NATIONAL ORIGIN	14. AGE (<i>State</i>)	15. REPRISAL
16. ALLEGATION(S) OF DISCRIMINATION (<i>Summarize</i>) (<i>Continue on separate sheet, if necessary.</i>)							

17. IF AN INVESTIGATION WAS CONDUCTED, DID THE INVESTIGATOR FIND DISCRIMINATION? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No Discrimination, but recommended corrective action.	
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18. CONCERNING THE USACARA RECOMMENDATION, DID THE COMMANDER, IN THE PROPOSED DISPOSITION <input type="checkbox"/> Reject It <input type="checkbox"/> Accept It <input type="checkbox"/> Modify It.	
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19. DID THE COMPLAINANT (<i>Check One</i>)		21. DESCRIPTION OF ANY DISCIPLINARY ACTION TAKEN AS A RESULT OF THE COMPLAINT (<i>Check Appropriate Box(es)</i>)	
a. Fail to respond to the notice of proposed disposition?		a. Separation.	g. Involuntary downgrade.
b. Request decision by the Director of EEO without hearing?		b. Suspension.	h. Counseling.
c. Request a hearing and subsequent review by the Director of EEO?		c. Oral reprimand.	i. Training.
20. IF NO HEARING WAS HELD, OR THE HEARING WAS NOT COMPLETED, DID THE AGENCY MAKE A DECISION ON THE MERITS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Proposed disposition adopted as the Agency final decision.		d. Written reprimand.	j. None.
		e. Lateral reassignment.	k. Other (<i>Specify</i>).
		f. Reassignment to non-supervisory position.	

22. WHERE DISCRIMINATION IS FOUND, REPORT REASONS FOR TAKING OR NOT TAKING DISCIPLINARY ACTION
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23. DESCRIPTION OF ANY REMEDIAL OR CORRECTIVE ACTION TAKEN INCLUDING THOSE COMPLAINTS WITHDRAWN BY THE COMPLAINANT AND THOSE CANCELED FOR FAILURE TO PROSECUTE
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PART B- NATURE OF CLOSING ACTION (Check One)

24. Rejection (<i>Untimely</i>)	26. Settlement	28. Withdrawal	30. Decision on Merits	32. Cancellation (<i>Failure to Accept Full Relief</i>).
25. Rejection (<i>Outside Purview</i>)	27. Rejection (<i>Identical to previous complaint</i>)	29. Cancellation (<i>Failure to prosecute</i>).	31. Cancellation MSPB -Litigation Decision.	
33. TOTAL PROCESSING DAYS (<i>From date of formal complaint to closure</i>)	34a. NAME OF AGENCY OFFICIAL PREPARING REPORT		34c. TELEPHONE NO.	
	34b. TITLE			

PART C- INDICATE AMOUNT OF MONETARY RELIEF PROVIDED (*Back Pay*)

35. RETROACTIVE HIRE \$	36. RETROACTIVE PROMOTION \$	37. REINSTATEMENT \$
38. RESCIND DISCIPLINARY ACTION \$	39. OTHER \$	40. TOTAL ATTORNEY FEES & COSTS AWARDED \$

41. SIGNATURE OF EEO OFFICER

42. REMARKS (*Continue on separate sheet, if necessary.*)